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| NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES | | Docket Number (Optional) 1163-0340P |
| In re Application of Toyokazu SUGAI | | |
| Application Number 09/857,491-Conf. #5202 | | Filed June 6, 2001 |
| For DEVICE FOR SENDING OUT DATA IN WHICH ASSOCIATED DATA IS MULTIPLEXED WITH MAIN DATA | | |
| Art Unit 2623 | | Examiner S. A. Chowdhury |
| Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner | | |
| The fee for this Notice of Appeal is (37 CFR 41.20(b)(1)) \$ 500.00 | | |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: \$ _____ | | |
| <input type="checkbox"/> A check in the amount of the fee is enclosed | | |
| <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached | | |
| <input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet | | |
| <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No 02-2448. I have enclosed a duplicate copy of this sheet | | |
| <input checked="" type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed | | |
| I am the | | |
| <input type="checkbox"/> applicant /inventor | | |
| <input type="checkbox"/> assignee of record of the entire interest See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96) | | |
| <input checked="" type="checkbox"/> attorney or agent of record Registration number 29,680 (703) 205-8000 | | |
| <input type="checkbox"/> attorney or agent acting under 37 CFR 1.34 Registration number if acting under 37 CFR 1.34 _____ Date September 4, 2007 | | |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required Submit multiple forms if more than one signature is required, see below*. | | |
| <input type="checkbox"/> *Total of 1 forms are submitted | | |